

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN
See "Instructions for Service of Process by U.S. Marshal"

JDLS ✓

PLAINTIFF United States of America	COURT CASE NUMBER 3:14-CV-320
DEFENDANT \$18,480.00 U.S. Currency Seized from El A. Willis on February 10, 2014	TYPE OF PROCESS Complaint, Notice, Warrant

SERVE AT NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
Shonta Wilson
 ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)
 1401 Daylilly Dr., Apt. # 268, Knoxville, TN 37920

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW Anne-Marie Svolto Assistant U.S. Attorney U.S. Attorney's Office 800 Market Street, Suite 211 Knoxville, TN 37902	Number of process to be served with this Form 285 Number of parties to be served in this case Check for service on U.S.A.
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SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Fold

Fold

14-DEA-594590 - Serve Complaint documents on party/potential claimant.

Signature of Attorney other Originator requesting service on behalf of: <i>Anne-Marie Svolto / by J. Sorey</i>	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER 865.545.4167	DATE 09/22/2014
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SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process 3	District of Origin No. 74	District to Serve No. 74	Signature of Authorized USMS Deputy or Clerk <i>See Nam</i>	Date 9/22/14
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I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.

☒ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)	<input type="checkbox"/> A person of suitable age and discretion then residing in defendant's usual place of abode
Address (complete only different than shown above)	Date 31 OCT 14 Time 1:25 pm Signature of U.S. Marshal or Deputy <i>[Signature]</i>

Service Fee 800	Total Mileage Charges including endeavors 2.24	Forwarding Fee	Total Charges 75.24	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*) \$ 75.24
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REMARKS: 9/22/14 certified mailed Complaint, Notice, & Warrant # 7001 2510 0006 2086 5502
 10/31/14: NO PERSON OF THAT NAME @ ADDRESS AS OF CURRENT RESIDENT, NO FORWARDING ADDRESS
 12/10/14- Received Certified envelope "Unclaimed" noticed Returned unserved 7001 2510 0006 20006 2086

- PRINT 5 COPIES:**
1. CLERK OF THE COURT
 2. USMS RECORD
 3. NOTICE OF SERVICE
 4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
 5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

Form USM-285
Rev. 12/15/80
Automated 01/00

U.S. Postal Service

CERTIFIED MAIL RECEIPT

(Domestic Mail Only; No Insurance Coverage Provided)

2055 9802 9000 0752 1007

OFFICIAL USE

Shonta Wilson

1401 Daylilly Dr Apt# 268

Knoxville, TN. 37920

Total Postage & Fees 0

Sent To

Street, Apt. No.,
or PO Box No.

City, State, ZIP+4

PS Form 3800, January 2001

See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Shonta Wilson
1401 Daylilly Dr Apt# 268
Knoxville, TN. 37920

2. Article Number

(transfer from service label)

7001 2510 0006 2086 5502

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☐ No

3. Service Type

☒ Certified Mail☐ Express Mail☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

U.S. Department of Justice
United States Marshals Service
Eastern District of Tennessee
800 Market Street, Suite 320
Knoxville, TN 37902
Official Business
Penalty for Private Use \$300

7001 2510 0006 2086 5502



CERTIFIED MAIL

Shonta Wilson
1401 Daylilly Dr Apt# 268
Knoxville, TN. 37920

UNCLAIMED

2014 DEC 10 11:45
U.S. MARSHAL E/TN
KNOXVILLE, TN

RECEIVED



UNITED STATES POSTAGE
\$007.82
0001126175 SEP 22 2014
MAILED FROM ZIP CODE 37902

LN / 9/27/32